	PATENT	APPL		ON FEE D			ION RECO	RD		10/0	1 Ψ	208	
CLAIMS AS FILED - PART I (Column 1) (Column 2)								-	SMALL TYPE	ENTITY	OR		R THAN ENTITY
FOR			NUMBER FILED			NUMBER EXTRA		Г	RATE	FEE	7	RATE	FEE
BASIC FEE.								1 [380.00	OR		760.00
TOTAL CLAIMS			minus 20=			•			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			minus 3/=		•		lt	X3 9=		OR	X78=		
MULTIPLE DEPENDENT CLAIM PRESENT								+130=		OR	+260=		
* If the difference in column 1 is less than zero, enter "0" in column 2								L	TOTAL		ОЯ	TOTAL	
CLAIMS AS AMENDED - PART II											-4	OTHER	THAN
	114/01	(Colu	umn 1)_		(0	Column 2)	(Column 3)	-	SMALL	ENTITY	OR	SMALL	
ENT A		REM. AF	AIMS AINING TER IDMENT		Pf	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENOMENT	Total	* Z	52	. Minus	**	52	= Ø .	ı	X\$ 9=		OR	X\$18=	
	Independent FIRST PRESE	*	<u>5</u>	Minus	DENIC	<u> </u>	= 'Ø		X3 9=		OR	X78=	
	PINST PRESE	NIAIIO	IN OF M	OLTIPLE DE	PENL	ENI CLAIM	· .		+130=		OR	+260=	
2/15/10						<u> </u>			, ,				
2	111/11	•					·	ΑC	TOTAL OUT FEE		OR	TOTAL ADDIT, FEE	
2	115/05		<u>ımn 1) _</u>	· · · ·	(C	: Column 2)	(Column 3)	AD	TOTAL DOIT. FEE	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	OR		
8	115/05	REM/ AF	IMN 1) AIMS AINING TER OMENT		PF	Column 2) HIGHEST NUMBER REVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	Г		ADDI- TIONAL FEE	OR		ADDI- TIONAL FEE
8	/15/05 Total	CL REMA AF AMEN	AIMS AINING TER	Minus	PF	HIGHEST NUMBER REVIOUSLY	PRESENT		OOIT. FEE	ADDI- TIONAL	OR	ADDIT. FEE	TIONAL
	Total Independent	CLU REMA AF AMEN	AIMS AINING TER DMENT	Mínus	PF	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	TIONAL
MENDMENT B	Total	CLU REMA AF AMEN	AIMS AINING TER DMENT	Mínus	PF	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE X\$ 9=	ADDI- TIONAL	OR	RATE X\$18=	TIONAL FEE
MENDMENT B	Total Independent	CLU REMA AF AMEN	AIMS AINING TER DMENT	Mínus	PF	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE X\$ 9= X39=	ADDI- TIONAL	OR OR OR	RATE X\$18= X78=	TIONAL FEE
MENDMENT B	Total Independent	CLU REMA AF AMEN * 1 *	AIMS AINING TER DMENT 7 N OF MU	Mínus	PEND (C	HIGHEST NUMBER REVIOUSLY PAID FOR 5 DENT CLAIM	PRESENT EXTRA		RATE X\$ 9= X39= +130=	ADDI- TIONAL	OR OR OR	RATE X\$18= X78= +260= TOTAL	TIONAL FEE
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AMENDMENT C AMENDMENT B	Total Independent FIRST PRESE	CLU REMA AF AMEN * I * NTATIO * NTATIO TITLE TIPLE TIPLE TIPLE PREVIOUS AFTER AFTER AFTER AMEN II * NTATION II IS INC. TIPLE TIPLE PREVIOUS AFTER AMEN II INC. TIPLE TI	MIMS AINING TER DMENT N OF MI N OF MI SS than the riously Pa	Minus JLTIPLE DE Minus Minus JLTIPLE DEI e entry in coluid For IN THI	PEND (C PR F F F F F F F F F F F F F F F F F F	PAID FOR CLAIM COLUMN 2) HIGHEST HI	PRESENT EXTRA = (Column 3) PRESENT EXTRA = = = = = = = = = = = = = = = = = = =	AD 1	RATE X\$ 9= X39= +130= TOTAL OIT. FEE X\$ 9= X39=	ADDI- TIONAL FEE	OR OR OR OR	RATE X\$18= X78= +260= TOTAL ADDIT. FEE RATE X\$18= X78=	ADDI-TIONAL

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